## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	
	C C00569905
Check if 24-hour report X 48-hour report New report Amends report fi	led on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
CLEAR CHANNEL OUTDOOR	05 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 591790	Amount
City State Zip Code	20300.00
SAN ANTONIO TX 78258	Transaction ID : SE24.1028  Date of Disbursement or Obligation
Purpose of Expenditure BILLBOARDS  Category/ Type 004	04 / 27 / 2015
Name of Federal Candidate Support Of	ffice Sought: House District:
DD DEN CARSON	President Senate State: IA
	sbursement For:
Full Name of Payee COLORTREE GROUP, INC.	Date of Public Distribution/Dissemination
Mailing Address 8000 VII LA PARK DRIVE	04 27 2015
Walling Address 8000 VILLA PARK DRIVE	Amount
City State Zip Code	5180.88
RICHMOND VA 23228-6500	Transaction ID : SE24.197  Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - PRINTING  Category/ Type  004	04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ffice Sought: House District:
DR. BEN CARSON Oppose	X President Senate State:
	isbursement For: X Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	25480.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Robert Frank  [Electronically Filed] Date	M / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	